



Child/Young Person Information Form

This form is to be completed for all Hereford & District Wheelers Cycling Club (H&DWCC) activities which include children/young people under18, by a parent, carer or guardian.

Child/Young Person

Activity

Name	Tick box for relevant activity. Winter turbo sessions <input type="checkbox"/> Group rides <input type="checkbox"/>
Address	
Home Phone	
Date of Birth	

Emergency Contact 1

Emergency Contact 2

Name	Name
Relationship	Relationship
Address	Address
Contact number(s) during activity	Contact number(s) during activity

Medical history (If considered relevant)

Any medication currently being taken	Any current illness or disability
Has the YP been vaccinated against Tetanus? YES/NO	Is the YP allergic to any medication? If yes, please specify:
Date of last injection	

Declaration

I confirm that.....is in good health and is fit to participate in the activity and that H&DWCC does not accept any responsibility for them whilst participating in the activity, however in the event of them not being able to continue with the activity H&DWCC will ensure you are notified as soon as is practicable/possible.

I understand this is an activity which can involve children/young people and therefore the majority of participants will not have undergone a DBS check, as this is not a mandatory requirement.

Signed (Parent/Carer/Guardian): _____ Date: _____

PLEASE COMPLETE IMPORTANT INFORMATION OVERLEAF



Photos & Videos

During activities connected with H&DWCC, the club may wish to take photographs that include your child/young person. The photographs may be used for displays, publications and on the web site by us or by local newspapers.

Photography or filming will only take place with the permission of H&DWCC and under appropriate supervision. Addresses of children/young people will never be given out. Images that might cause embarrassment or distress will not be used.

Before taking any photographs of your child/young person, the club needs your permission. You can ask to see images of your child/young person held by H&DWCC. You may withdraw your permission at any time.

Permission

- YES, I give my permission for pictures and videos to be taken and used as stated above.
- NO, I do not give permission for pictures and videos to be taken and used as stated above.

Signature: (Parent/Carer/Guardian)	Date:
Print Name:	Relationship to child/young person:

THIS FORM IS VALID UNTIL 31 DECEMBER, 2017. NEW FORM IS REQUIRED FROM 01 JANUARY, 2018.